

The Causal Chain of The Covid-19 Pandemic and The Threat of Stunting: A Literature Review

Vivi Varlina¹, Stefani Ira Pratiwi²

{vivi.varlina@universitaspertamina.ac.id¹, 106119004@student.universitaspertamina.ac.id²}

Pertamina University, Jakarta, Indonesia^{1,2}

Abstract. The problem of stunting is a big challenge for Indonesia. Additionally, during the Covid-19 pandemic, restrictions on socio-cultural activities, a sharp decline in household income, and changes in consumption levels caused the nutritional needs of children to be unfulfilled, resulting in disruption of growth and health conditions. This study uses issue management and risk communication on the context of health communication, and develops methodology of literature review with an explanatory qualitative approach to identified of issues taking into account balanced factual evidence, emphasizes involvement of communities, and collaborative decisions. The study aims to understand that the pandemic has a very significant impact on increasing of poverty rate and affect stunting alleviation in Indonesia. The result shows that the application of health communication must be integrated with other policy sectors because the problem of stunting in a pandemic is multidimensional. The Government must observe critically Poverty Gap Index and Poverty Severity Index in rural and urban areas, formulate a stunting alleviation health emergency response system that is integrated into access to health services, ownership of health insurance, and utilization of natural resources and human resources.

Keywords: Stunting, Issue Management, Risk Communication, Health Communication, Covid-19.

1 Introduction

On March 9, 2020, WHO (World Health Organization) officially announced the Covid-19 Pandemic [1]. This pandemic has become a difficult period and has made each country's government quite overwhelmed to handle it. This is due to the widespread problem of the pandemic and covers various aspects. Although a pandemic is a problem in terms of health, it also has an impact on other aspects of life, such as the economy and society. For example, the issuance of a social restriction policy has limited the social and economic activities of the community. This condition then has an impact on the decline in economic growth in areas experiencing a pandemic [2], which in turn will also have an impact on increasing unemployment [3]. Whereas the unemployment rate is very influential on the poverty rate [4].

In Indonesia, poverty rates have spread since the pandemic. Quoted from [theconversation.com](https://www.theconversation.com), based on data from Survei Sosial Ekonomi Nasional (SUSENAS) released by Badan Pusat Statistik (BPS), there was an increase in poverty in all provinces of Java and Bali when compared to September 2019 data. This was due to the first wave of the pandemic that occurred in March 2020. The following is data on the increase in poverty in provincial coverage in the Java and Bali regions. The highest increase in the poor was experienced by DKI Jakarta (1.11 percent points), West Java (1.06 percent points), and Banten (0.98 percent points). Meanwhile, in Bali, the area with the highest increase was Buleleng Regency (0.93 percent point) which stretches along the northern coast of Bali Island, followed by Denpasar City (0.86 percent point) as the center of tourism growth, and Bandung Regency (0.84 percent points) [5].

Several factors can increase the poverty rate during the pandemic, including layoffs and reduced salaries. This condition leads to a decrease in household income and purchasing power which in affect other problems, especially for households with lower economic levels. One of the issues caused by poverty during a pandemic is stunting. Stunting is a strategic issue discussed by the Government of Indonesia and has even become one of the 14 strategic priority projects of the 2020-2024 National Medium-Term Development Plan (RPJMN), where the prevalence of stunting is targeted to decrease to 14%. During the Covid-19 Pandemic, the target for reducing the prevalence of stunting is quite worrying considering that stunting is closely related to poverty. Households that are at the poverty line cannot fulfill their nutritional needs, both in quality and quantity. If this happens continuously in mothers who are pregnant or in children who are in their early stages of growth, then these children are at risk of stunting.

In general, stunting is defined as a chronic nutritional problem in children caused by a lack of intake or nutritional needs at the beginning of their growth. Gibson said stunting is described by a person's height that does not match his age, whereas this situation also reflects his nutritional status in the past [6]. Even so, stunting is considered a health problem and can also be considered a demographic and social problem that has a significant impact. Ironically, a child who experiences stunting in the long term is not only disturbed in his physical growth but also mentally, intellectually, and cognitively [7]. Even the WHO says stunting children are vulnerable to disease, intellectual decline, and productivity, and have the potential to increase poverty rates in the future.

In Indonesia, data states that the prevalence of stunting is still at high level. This can be seen from Survei Status Gizi Balita Indonesia (SSBI) in 2019, it was found that the percentage of stunting prevalence in Indonesia reached 27.6 percent [8]. With this percentage, Indonesia occupies the second-highest position in the Southeast Asia Region with a high stunting rate. However, based on data from Survey Status Gizi Balita Indonesia (SSGBI) in 2021, the prevalence of stunting in Indonesia is currently at 24.4 percent or 5.33 million children under five. Although the prevalence of stunting has decreased, this figure exceeds the provisions recommended by the World Health Organization (WHO), which is below 20 percent [9].

This condition is very concerning, especially with the pandemic which is considered to have the potential to make it difficult to suppress the stunting rate. The Director-General of Fiscal Balance, Ministry of Finance, Astera Primanto Bhakti stated that the pandemic situation has increased poverty rates [10]. About stunting, the increasing poverty rate seems to be a warning for the government to worry about the fulfillment of nutritional intake for children from poor

households. In addition, the Acting Director-General of Public Health of the Ministry of Health, Kartini Rustandi, said that the use of health facilities that were too focused on the problem of the Covid-19 Pandemic could have an impact on the percentage increase in stunting [11]. This is due to the difficulty of examining pregnant women and babies and the difficulty of monitoring the growth and development of children. Thus, the Covid-19 Pandemic not only resulted in soaring poverty rates that affected people's income and purchasing power but also disrupted the availability of food in the household. Moreover, health facilities have a high burden and more focus on handling the virus so that the problem of malnutrition in children is not significantly monitored.

Based on this background, the researchers are interested in discussing more deeply how the pandemic has had a very significant impact on the increase in the poverty rate in Indonesia. If this happens sustainably, this condition will affect the acceleration of the decline in stunting prevalence because stunting is closely related to poverty alleviation. This study emphasizes the issue of stunting more comprehensively and how risk communication is empowered as a strategic approach. Researchers also formulate systematic efforts related to health communication practices to accelerate stunting alleviation in Indonesia.

This paper is structured systematically by containing an introduction, literature review, methodology, result and discussion, conclusion, and references. In the background, the topics or issues raised for discussion can be identified. Then in the literature review, the theoretical basis and concepts that can be used to understand the topic or problem are described. Meanwhile, the methodology contains the methods that the researcher chooses to understand, collect, and analyze the data. The results of the data analysis are interpreted and discussed in the results and analysis section. Then the information is packaged briefly and concisely in the conclusion section. At the end of the paper, a reference is attached to the data source used by the researcher to avoid plagiarism.

2 Literature Review

2.1 Issue Management

Issue management is the capacity to understand, mobilize, coordinate, and direct all strategic functions and policy planning, as well as all capabilities to achieve a goal: meaningful participation in the creation of public policies that affect the future of individuals and institutions [12]. In a specific scope, issue management must include the following elements, namely (1) anticipating emerging issues, (2) identifying issues selectively, (3) taking advantage of opportunities and dealing with vulnerabilities, (4) planning from the outside in, and (5) oriented to the core of the problem.

The definition of issue management was also developed by Chase and Barry Jones. According to him, issue management is an instrument used by an organization to identify, analyze, manage issues that arise, and respond to issues before they occur [13]. This shows a critical, responsive, and open attitude to various situations. This attitude is shown as an effort to understand the fundamental causes so that an institution is more prepared and mature in formulating strategic policies related to issues before they develop into conflicts.

The conceptualization described above shows that the definition of issue management has evolved which is influenced by various factors and has consequences for organizational

activities. At the beginning of its emergence, the definition of issue management was more a response to the public's lack of trust in organizations and authorities. Meanwhile, in its development, issue management is also aimed at observing changes that can become opportunities for organizational development. Two points are always attached to issue management, namely (1) early identification of issues that have a potential impact, and (2) strategic responses designed to reduce or increase the impact of emerging issues [14]. In the context of public opinion, for example, issue management “attempts to identify changes in public opinion so that organizations can respond to changes before they develop into conflict.”

Meanwhile, if issue management is seen as a discipline, various approaches can be used to analyze the management process model. Some of these approaches include a systems approach, a strategic approach, a rhetorical approach, and an integrated approach [13].

Based on the opinion of Pace and Faules, *the systems approach* assumes that an organization is an interconnected system, and the main part that connects it is communication. According to this approach, there are two objectives of issue management, namely minimizing “shock” by providing early warning and promoting a systematic response by acting as a provider of advice, education, information, and problem-solving. *The strategic approach* provides completeness to the systems approach, where this approach emphasizes strategic action. This approach focuses more on the interpretation of individuals and groups of developing issues and will later be managed and linked to the cognitive orientation of organizational action and individual behavior itself. *The rhetorical approach* discusses several parties (organizations and governments) who have the authority to create public policies. Therefore, in the management of issues, these parties can also exercise their influence. Based on this approach, Chase and Jones propose three response strategies to issues, namely: reactive, adaptive, and dynamic. The last approach is the *integrated approach*, an extension of the systems, strategic, and rhetorical approach. This approach is the latest approach developed by Taylor, Vasquez, and Doorley. The essence of this approach is to overcome isolation, encourage communication, and stimulate reform. According to Taylor, Vasquez, and Doorley, issue management is most effective when it involves the public in it. In this way, this approach will look at the interests of the organization first, then the public interest, and finally the interests are converged. Given the breadth of the goals to be achieved, Ledingham, Bruning, and Wilson suggest that the endeavor is not a short-lived undertaking, but rather will take a significant amount of time to connect relationships. But generally, these relationships do manage to strengthen over time [13].

Issue management is a proactive process that has two essences, namely early identification of potential issues and the need for strategic responses designed to reduce or enlarge the consequences of these issues. In the process, issue management requires the alignment of organizational principles and policies with existing realities including other factors such as social, economic, and political [14]. Thus, in the context of this research, because the pandemic is an issue that has a sustainable impact, and even has the potential to affect the acceleration of the prevalence of stunting reduction, then elaborative issue identification design is needed by considering other factors such as social, economic, political, and social values.

2.2 Risk Communication in The Context of Public Health

Risk communication is an extension of issue management [12]. Risk communication begins as a process of collecting scientific data that is conveyed precisely, easily understood, and meaningfully. In an organizational context, risk communication depends on the actions of the organization. In other words, risk communication is defined as social risk control by related agencies with several purposes such as informing, educating, and assisting decision making [15].

The purpose of risk communication is to help stakeholders and the wider community identify a rational understanding of various risk-based decisions, taking into account balanced factual evidence of the problem at hand about their interests and values. Thus, the substance of risk communication is not only a scientific assessment of the impacts that can be harmful but also how confident and capable the organization is to do something so that it can achieve the appropriate level of safety. Regarding health issues and welfare aspects, the discipline of risk communication offers substantial things to improve the quality of society through community development, the involvement of community groups or communities emphasizes collective judgment, collaborative decisions that are wiser and according to community needs. This logic suggests that infrastructure in society emerges or is specifically created to discuss, challenge, and make decisions relevant to risk and crisis tolerance, mitigation, and communication [16].

Risk communication emphasizes different types of messages and processes. As part of management, risk communication will involve many people in its implementation, both interactions with parents, children, state institutions, scientists, workers, writers, and the general public. Sometimes information that predicts a risk is useful in providing an analysis of the losses that may be incurred. In the message processing process, all messages that will be conveyed to the audience will be adjusted to the needs and characteristics of the audience itself. This is due to differences in audience backgrounds that cannot be equated with one another, meaning that sometimes there are audiences who are ready to receive crisis information so that they only need explicit instructional information, but there are also audiences who must be given basic information before they can be notified. The essence of implementing crisis communication, these cannot be equated [17]. This is called framing. The framing process will be critical to effective risk communication. According to Sheila Jasanoff, risk communication is often understood as a code (containing words) that is used by experts and institutions to "brainwash." Therefore, effective risk communication will only be realized if the information provided can guide the audience in the risk decision-making process [17].

In stunting conditions, the risk communication developed must also be based on the context of health communication. Health communication itself is part of communication between humans that focuses on how an individual in a group/community faces health-related issues and tries to maintain their health [18]. The main focus in health communication is the occurrence of transactions that are specifically related to health issues and the factors that influence these transactions.

Health communication is a systematic effort to positively influence the health behavior of individuals and communities by using various communication principles and methods, both interpersonal communication and mass communication. In addition, health communication is also understood as a study that studies how to use communication strategies to disseminate health information that can influence individuals and communities to make the right decisions related to health management [19].

Health communication includes information about disease prevention, health promotion, health care policies, business regulations in the health sector which as far as possible change and update the quality of individuals in a community by considering scientific and ethical aspects. The main purpose of health communication is to change health behavior to improve health status. Health communication increases individual awareness of health issues, health problems, health risks, and health solutions [20].

This is in line with the guidelines recommended by WHO. In a health emergency, people need to know what health risks they face. Accurate information provided early on, with the right language and channels, enables individuals to make choices and take action to protect themselves, their families, and their communities from health hazards. Thus risk communication is an integral part to respond to an emergency response. This will involve a real-time exchange of information, advice, and opinions between experts, community leaders, government officials, and people at risk [21].

This study uses the guidelines for risk communication in the context of public health/Emergency Risk Communication (ERC) formulated by WHO. In this case, three steps must be identified, namely how to:

1. Build trust and engage the affected population.
2. Integrating risk communication into health and emergency response systems.
3. Practice risk communication is based on a systematic assessment of evidence about what works and what doesn't work from previous steps or programs.

These guidelines were developed by first ensuring that information on stunting is accurate, message mapping is carried out appropriately, and policies regarding stunting conditions can be applied effectively in national to local contexts. In health epidemics and pandemics, or humanitarian crises and natural disasters, Emergency Risk Communication (ERC) is very effective because it enables people at risk to understand and adopt protective behaviors. This allows competent parties and experts to listen and explore community needs so that the suggestions or solutions provided are more relevant, reliable, and acceptable [21].

In the context of this research, the literature on issue management and risk communication is collaborated as an approach by considering that issue management is a management process whose goal is to reduce risk and create opportunities that involve various parties [22]. Conceptualization of issue management is used as a critical and responsive instrument to a condition which then becomes a construction in risk communication practices to respond to these conditions [22].

3 Methodology

The research method is a scientific step used to obtain data to meet certain goals [23]. This study was designed with a qualitative approach and used a literature study method. According to Zed, library research is carried out within the limits of library collections and does not require field activities [24]. Thus, this research only relies on various references as data sources. The data

sources that will be used in this research are secondary sources. According to Hasan, secondary data is data obtained through existing sources [25].

Secondary data is appropriate to use to analyze events based on time series [26]. This is the same as what was done in this study, researchers observed the causes of the COVID-19 pandemic and the threat of stunting at the same time.

According to Suryana [27], qualitative research aims to find patterns of interactions that are interactive, find theories, and describe complex realities. Not only that, in qualitative research data obtained through various sources is collected but not only to describe reality but also to look for other meanings behind the data. This is due to the nature of the results of research with a qualitative approach will tend to be meaningful compared to generalizations.

The definition of library research was also conveyed by Nazir. According to him, library research is a technique of collecting data by examining books, literature, notes, and reports related to research problems [28]. Therefore, the literature that will be used in this study will be close to the latest data on stunting, issue management, and risk communication in the context of public health. These references are obtained through journals, books, articles, previous research reports that are credible and relevant to the problem. In the inclusion of references, citation techniques are used in this study as a form of appreciation for previous scientific works, increasing the credibility of the writing, and avoiding plagiarism.

4 Result and Discussion

4.1 Pandemic and Stunting: Strategic Issue for National Development

Based on the analysis of literature sources, several issues were developed from the issue of the pandemic and stunting. First, stunting is a strategic issue that is one of the big agendas of the Indonesian government. Citing a work report released by the National Team for the Acceleration of Poverty Reduction (TNP2K) explained that in 2018 Indonesia was one of the countries with the highest prevalence of stunting in the world at 30.8 percent. Therefore, to achieve the 2015-2019 National Medium-Term Development Plan (RPJMN) target with a stunting rate of 28 percent, in 2018 the government set priority areas for stunting prevention in 100 districts/cities through a program that was gradually expanded until 2021. The paper explains that improving the quality of life of the Indonesian people is a priority target for national development, where this will be achieved, among others, through improving the quality of education, health and community welfare, social security, and strengthening development in villages. In this regard, to determine the quality of human resources, the Human Development Index (IPM) is the benchmark, while to assess the extent to which the welfare of the people of a region can be measured through poverty rate and nutritional status [29].

Furthermore, stunting reduction is now included as one of the 14 strategic priority projects of the 2020-2024 RPJMN, where stunting prevalence is targeted to decrease to 14 percent [30]. Of course, this target is even more challenging if you reflect on the current pandemic conditions. The issue of stunting itself is closely related to poverty. According to the Coordinating Minister for Human Development and Culture (Menko PMK) Muhadjir Effendy, the key to reducing stunting is poverty alleviation [31]. Poverty contributes to the non-fulfillment of good nutrition for mothers and children. Based on press release of BPS July 2021 (Figure 1), describes that poverty reduction in recent years has tended to decline. However, during the pandemic, poverty

in Indonesia has increased significantly since September 2019. The percentage of poor people in September 2020 was 10.19 percent, an increase of 0.41 percentage points against March 2020 and an increase of 0.97 percentage points against September 2019. In other words, there were 27.55 million poor people in September 2020, an increase of 1.13 million people in March 2020, and an increase of 2.76 million people in September 2019. However, in March 2021, the percentage of poor people began to decline again despite this decline still being very small [32].



Fig 1. Poverty development in Indonesia, March 2011-2021.

If referring to the concept of poverty used by BPS, poverty is seen as an inability from an economic perspective to fulfill basic food and non-food needs as measured by the poverty line. Referring to Figure 2, poverty in Indonesia began to decline in March 2021. This can be seen in the improving economic recovery, especially the highest growth dominated by the restaurant and hotel, transportation and communication sectors. However, the growth of household consumption is still minus, namely in the categories of health and education, food and beverages (other than restaurants), as well as clothing and care services. Specifically for meeting household food and beverage needs, the value is -1.53 percent. This minus value is caused by the large number of people who have lost their jobs or reduced income during the Covid-19 pandemic, so that families are less able to buy healthy and nutritious food [32].

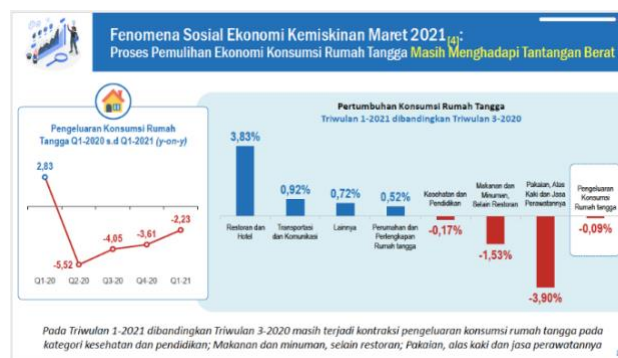


Fig 2. Household consumption growth.

Furthermore, the data is about how the influence of the pandemic and poverty has the potential to hinder the reduction in stunting prevalence is by looking at how far households fulfill their health needs. If it is observed from Figure 2, the category of health and education fulfillment shows a minus, namely -0.17 percent. This condition is reinforced by the 2021 Health Statistics Profile from BPS, where children who are sick and receive hospitalization indicate that the child comes from a household with a high economic status and has better access to health facilities.

Based on these data, it shows that the pandemic has a very significant impact on the poverty rate in Indonesia. Poor conditions disrupt food availability in the household so that households cannot fulfill their nutritional needs, both in quality and quantity. Furthermore, poverty will also prevent households from fulfill their health needs. If this happens continuously in mothers who are pregnant or in children who are in the early stages of their growth, then these children are at risk of stunting. Therefore, the acceleration of stunting reduction is closely related to poverty alleviation. Especially during the pandemic, conditions become increasingly complex which causes stunting reduction efforts to be very likely to experience a slowdown. In this context, a strategic response is needed with measurable policies, ensuring that the program is not partial and involves all elements, and ensures continuous education.

4.2 Emergency Risk Communication (ERC) in Stunting Alleviation

Based on issue identification that has been carried out, the data shows that the Covid-19 pandemic has had a significant impact on poverty rate in Indonesia. Furthermore, poverty will have the potential to slow down the decline in the prevalence of stunting in Indonesia. When referring to stunting data in recent years, the stunting prevalence rate has indeed shown a decline. Quoted from Kemenkes.go.id, based on the results of the Indonesian Nutrition Status Study (SSGI) in 2021 the national stunting rate decreased by 1.6 percent per year from 27.7 percent in 2019 to 24.4 percent in 2021. from 34 provinces showed a decrease compared to 2019 and only 5 provinces showed an increase. However, despite the decline, this prevalence rate is still above the WHO requirement, even higher than neighboring countries, namely Vietnam (23%), Malaysia (17%), Thailand (16%), and Singapore (4%) [33].

In addition, in the Health Statistics 2021 in the section on child health, especially for the toddler group, it is stated that the age of toddlers (toddlers) is the age most vulnerable to experiencing health complaints (Figure 3). The data shows that children aged 0-4 years have health complaints of 47.15%. This value is the highest percentage compared to other child age groups.

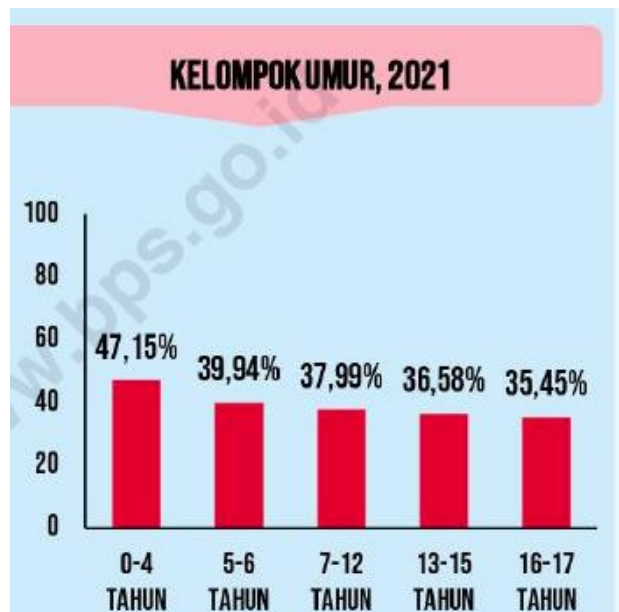


Fig 3. Percentage of children who have health complaints.

Thus, if it is not anticipated early on, the Covid-19 Pandemic will have a long-term impact. Children under five who are vulnerable to health complaints but are not adequately nourished, coupled with obstructions in accessing health services due to limited household capabilities, these factors will greatly affect the stunting reduction efforts. Regarding these conditions, referring to the emergency risk communication guidelines in the context of public health, three steps need to be formulated to map the public and strategically frame messages. In this case, building trust and involving affected communities is the first step to ensuring public acceptance of stunting alleviation. Risk communication is part of risk management that relies on public support to formulate policies and motivate individual and community behavior change.

To build trust, risk communication recommendations must focus on the availability of services that are needed by the community, easily accessible, and affordable. The pandemic condition should not reduce or limit the availability of adequate and quality health services, especially for pregnant women and infants, and children who need health services. On the other hand, amid limited mobility and disruption of household income, health services are also disrupted. Whereas the general public or in a more specific context, namely the population living on the poverty line, will depend heavily on public services, especially health, education, and transportation. According to UNICEF (2020), the Covid-19 pandemic has placed a heavy burden on health facilities, disrupted food supply chains, and lost income, thereby significantly increasing child malnutrition, including wasting (malnutrition) and stunting. The 2021 health statistics released by BPS also show that there is a decrease in the percentage of the population who have health insurance, from 69.29% in 2020 to 68.36% in 2021. Health insurance ownership is also higher for residents in urban areas compared to residents living in rural areas. Health insurance is closely related to the utilization of health services, especially when stunting cases are often

found in rural areas. In this case, the Government should realize the ownership of the National Health Insurance (JKN) which is evenly distributed for all Indonesian people.

Furthermore, to get community support and involvement, the state must be present and care in real terms, especially during and after the pandemic. Although in March 2021, the percentage of poor people began to decline, this decline was still very small. In February 2021, data of BPS reported that the Covid-19 pandemic had an impact on the existence of 15.72 million workers who experienced shorter hours (working status but experienced a reduction in working hours). This condition is very vulnerable to fluctuations in economic recovery and unemployment. In response to this condition, the state must establish policies not only in the form of short-term assistance programs but also far more strategic policies through community economic empowerment such as assisting home industry businesses and providing incentives for micro industries. When health services can be accessed easily and the local economy begins to recover, the trust and involvement of the community in an area towards stunting alleviation will be more conditioned and more focused. In other words, stunting alleviation will be maximized if individuals and communities are cared for, given access to health services, and empowered economically.

The second step of the ERC guidelines in the context of stunting alleviation is to integrate risk communication into the health emergency response system. In this context, the Government of Indonesia has a strategic role through national emergency preparedness programs. As described above, poverty is a very influential factor in slowing the decline in stunting prevalence. Therefore, the emergency response system must be integrated into policies to improve the welfare and quality of life of the community, among others through increasing social security, equitable development, and expanding job opportunities, especially in suburban areas and in villages because poverty is not just the number and percentage of poor people only, but it is necessary to pay attention to the high poverty disparity between urban and rural areas. There are two dimensions that the government should study, namely the poverty gap index and the poverty severity index. The poverty gap index indicates the distance between the average expenditure of the poor from the poverty line, where the higher the index value, the further the average expenditure of the population is from the poverty line. Meanwhile, the poverty severity index indicates the disparity in spending among the poor.

According to the September 2021 poverty profile data released by BPS (figure 4), when compared by region, the value of the Poverty Gap Index and Poverty Severity Index in rural areas is higher than in urban areas [34]. In September 2021, the Poverty Gap Index (P1) for urban areas was 1.23, while in rural areas it was much higher, reaching 2.25. Likewise, the Poverty Severity Index (P2) in urban areas is 0.29, while in rural areas it is higher at 0.59. Based on this, the Government must firmly formulate a stunting alleviation health emergency response system that is integrated into access to health services, ownership of JKN, and utilization of natural resources and human resources, especially in rural areas that are prone to poverty [35].

Tabel 6 Indeks Kedalaman Kemiskinan (P_1) dan Indeks Keparahan Kemiskinan (P_2) di Indonesia Menurut Daerah, September 2020–September 2021

Tahun	Perkotaan	Perdesaan	Total
(1)	(2)	(3)	(4)
Indeks Kedalaman Kemiskinan (P_1)			
September 2020	1,26	2,39	1,75
Maret 2021	1,29	2,27	1,71
September 2021	1,23	2,25	1,67
Indeks Keparahan Kemiskinan (P_2)			
September 2020	0,31	0,68	0,47
Maret 2021	0,31	0,57	0,42
September 2021	0,29	0,59	0,42

Sumber: Diolah dari data Survei Sosial Ekonomi Nasional (Susenas) September 2020, Maret 2021, dan September 2021

Fig 4. Poverty gap index (P_1) and poverty severity index (P_2) in Indonesia.

The third step is to practice risk communication based on a systematic assessment of the evidence and previous and currently available data. About the impact of the Covid-19 Pandemic, the Government has carried out various poverty alleviation programs targeting individuals and community groups as beneficiaries. However, this program has not reached its optimal target when Indonesia experiences extraordinary events, which were not taken into account previously. When the Government announced the Covid-19 entered Indonesia in March 2020, immediately in September 2020, poverty in Indonesia for the first time broke through double digits, since last 2017. A survey conducted by UNICEF and BPS to see the impact of COVID-19 showed that there was 75 percent of the sample households studied in October-November 2020 experienced a significant reduction in income compared to income at the beginning of 2020. The decline even occurred in all income groups. On the health aspect, UNICEF (2020) stated that the nutritional status of children in Indonesia, especially stunting, would worsen due to the increase in poverty rates caused by COVID-19.

Based on the analysis of these data and facts, efforts to reduce stunting prevalence during the pandemic are multidimensional. The complexity of poverty requires input in the form of up-to-date field data because the impact of the pandemic does not only apply today but is very likely to continue to have an impact in the following months and years for households that are vulnerable to being on the poverty line. ERC implementation must be formulated with various integrated and coordinated policy interventions. To improve the quality of life of the community, for example, education about stunting must be carried out in a real and sustainable manner. Education is no longer temporary or carried out only when there is a visit from the central government to the regions. However, education will be very strategic if it starts by forming community nodes, where the community is given training how to make in an informative design framework regarding the causes of stunting, as well as formulating prevention and mitigation. Through these community nodes, education about stunting is then continued periodically to surrounding residents or households experiencing stunting. This effort is a form of local community involvement in stunting alleviation. However, the beliefs and motivations of individuals who experience stunting are more or less influenced by the presence and caring actions of the community and surrounding communities through participatory dialogues in local wisdom.

Furthermore, in terms of the health emergency response system, information and coordination systems play a very important role. ERC recommendations will not be optimal or even fail if the affected individuals or communities within them do not trust the source of the information. In this context, the government and the community need to create and implement strategic risk communications that are tailored to the characteristics of the region and the population in the region. Institutions that have authority in stunting alleviation should provide explicit, consistent, and easy-to-understand information so that the public understands exactly what information they need to know regarding the risks of stunting.

The stunting reduction campaign has been quite massive. Reported from the Kominfo.go.id page concerning Presidential Regulation No. 42 of 2013 concerning the National Movement for the Acceleration of Nutrition Improvement, there are 13 ministries according to their main tasks and functions to prevent stunting [36]. The government's efforts to reduce stunting are carried out, among others, through programs to improve community nutrition, improve environmental-based sanitation, increase village budgets, and develop infrastructure. The big question is whether the campaign is focused on understanding and changing the behavior of individuals and communities in the local area? Has the publication of information been right on target or is it only informing activities or ceremonial moments? And how is the coordination and evaluation of programs carried out, especially during the pandemic or even post-pandemic?

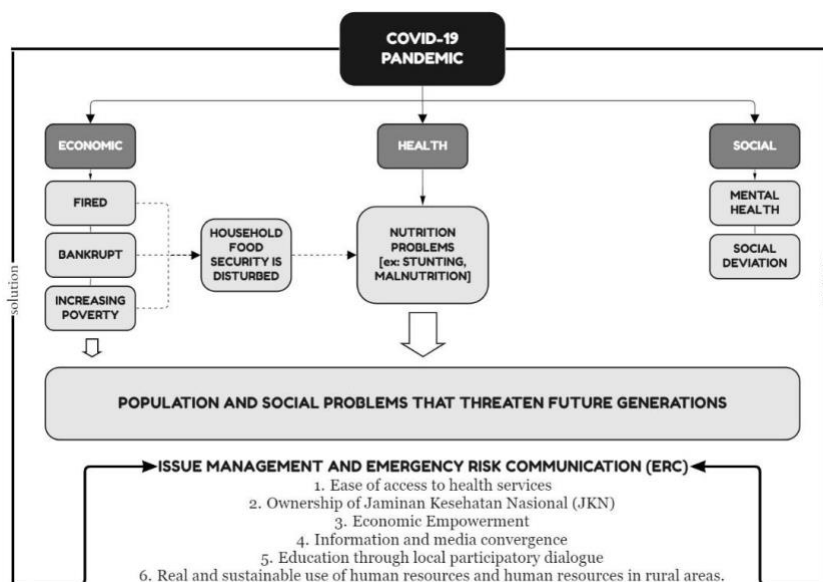


Fig 5. Result research.

Carrying out national campaigns effectively, especially when it comes to the impact of the pandemic, the information presented must be comprehensive, transparent, and timely. When the government launches a food security program, business incentives, or assistance program, for example, the information provided must also be accurate and not overlapping. Likewise, when

the social protection program is through access to health services or ownership of JKN, then implement the program in a fair, not partial, and sustainable manner. Implement risk communication strategies through the convergence of information at various levels in real-time by taking into account the social context. Information convergence can be done by using conventional media (television, radio, print media), new media (online media, social media), involving community leaders, activating public complaint rooms, and using typical regional discussion channels (such as posyandu, health centers, youth organizations, as well as other community associations). This convergence of media-based information and local wisdom not only facilitates coordination and evaluation but also these have the potential to build trust and motivate individuals, families, communities, and communities to be consistently involved in stunting prevention.

5 Conclusion

The pandemic has had a tremendous impact. One of the impacts is that many residents experience layoffs, thus contributing to increasing poverty rates. Even today there are still millions of workers who experience shorter hours, namely the status of a person working but experiencing a reduction in working hours, with the consequence of a reduction in salary. The pandemic has also caused a high disparity in poverty between urban and rural areas. Poverty disparities can be observed from the Poverty Gap Index and Poverty Severity Index. The Poverty Gap Index indicates the average distance of the expenditure of the poor from the poverty line, where the higher the index value, the further the average expenditure of the population is from the poverty line. Meanwhile, the Poverty Severity Index indicates disparity in spending among the poor. Based on the data, the value of the Poverty Depth Index and the Poverty Severity Index in rural areas is higher than in urban areas.

This poverty chain then affects the fulfillment of household purchasing power, the availability of adequate nutritional standards, and the obstacles to meeting health needs. If this happens continuously in mothers who are pregnant or in children who are in their early stages of growth, then these children are at risk of stunting. In response to this condition, the state must establish policies not only in the form of short-term assistance programs but also far more strategic policies through community economic empowerment such as assisting home industry businesses, providing incentives for micro-industry, formulating a stunting alleviation health emergency response system that integrated into access to health services, ensuring ownership of national health insurance (JKN), as well as the utilization of natural resources and human resources, especially in rural areas that are vulnerable to poverty.

As part of a systematic effort within the framework of health communication, stunting alleviation will be maximized if individuals and communities are given access to health services and are empowered by utilizing the potential of natural resources and human resources, especially in rural areas that are vulnerable to poverty.

As part of the Emergency Risk Communication (ERC) strategic guidelines in the context of public health, the government needs to provide education (training) through community nodes regarding the causes of stunting, prevention and control. Then, these community nodes educate continually the surrounding residents or households experiencing stunting. This effort is a form of local community involvement in stunting alleviation. Regarding the publication of

information and stunting prevention campaigns, the convergence of information at various levels must be carried out in real-time, transparently, and easily understood. Through accurate information and directing communication actions taking into account the social context of the community, acceptance and support from the community will be easier and more affordable. Thus, the government together with all levels of society has a strategic position to identify stunting problems in an area, monitor them, as well as contribute to the prevention and reduction of stunting prevalence in Indonesia.

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